

**IOWA DEPARTMENT OF NATURAL RESOURCES
ENVIRONMENTAL SERVICES DIVISION
FORM 30 - NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT APPLICATION**

PART F - CERTIFICATION

All applicants must complete Part F. All permit applications must be signed and certified. Before completing the Certification statement, review the Application Overview to make sure that you have completed all applicable Parts of Form 30. Also, indicate in the boxes provided which Parts you are submitting. By signing this certification statement, applicants confirm that they have reviewed all the included Parts and have completed all sections that apply to the facility for which this application is submitted.

FACILITY NAME:

PERMIT NUMBER:

Indicate which Parts of Form 30 you have completed and are submitting:

☐ Part A, Basic Application Information

☐ Part B, Expanded Effluent Testing Data

☐ Part F, Certification

☐ Part C, Toxicity Testing Data

☐ Part D, Industrial User Discharges and RCRA/CERCA Waste

☐ Part E, Combined Sewer Systems

Refer to the following to determine who is a officer for the purposes of this certification:

An application submitted by a municipality, State, Federal, or other public agency must be signed by either a principal executive officer or ranking elected official. A principal executive officer of a public agency includes: (1) The chief executive officer of the agency, or (2) a senior executive officer having responsibility for the overall operations of a unit of the agency.

An application submitted by a corporation must be signed by a responsible corporate officer. A responsible corporate officer means: (1) A president, secretary, treasurer, or vice president in charge of a principal business function, or any other person who performs similar policy- or decision-making functions; or (2) the manager of manufacturing, production, or operating facilities, if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

An application submitted by a partnership or sole proprietorship must be signed by a general partner or the proprietor, respectively.

ALL APPLICANTS MUST COMPLETE THE FOLLOWING CERTIFICATION.

I certify under penalty of law that this document and all attachments were prepared under my direct supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME

OFFICIAL TITLE

SIGNATURE

DATE

TELEPHONE NUMBER

Upon request of the permitting authority, you must submit any other information necessary to assess wastewater treatment practices at the treatment works or identify appropriate permitting requirements.

SEND COMPLETED PARTS OF FORM 30 TO:

IOWA DEPARTMENT OF NATURAL RESOURCES
COURTNEY CSWERCKO, WASTEWATER SECTION
WALLACE STATE OFFICE BUILDING
502 EAST 9TH STREET
DES MOINES, IA 50319